

AUG 13 2004  
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To Fax no.: (703) 872-9306

Page 1 of: 23

Attention: Examiner Phirin Sam  
Group Art Unit 2661From: Mr. James McGraw  
Smart & Biggar

Your file no.: 09/620,248

Reply to Ottawa file no.: 71493-688

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Date: August 13, 2004

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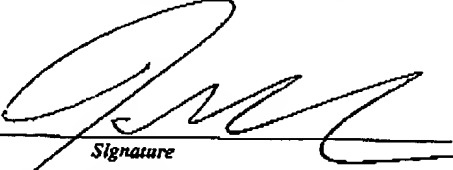
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|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|------------------------------|--|
| <b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        | Docket No.<br>71493-688 /aba |  |
| Applicant(s): <b>EVERT E. DEBOER, ET AL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
| Application No.<br>09/620,248                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Filing Date<br>July 20, 2000        | Examiner<br>Phirin Sam      | Customer No.<br>07380                                                                                                                                                                                                                                                                                                                                               | Group Art Unit<br>2661 | Confirmation No.<br>3417     |  |
| Invention: <b>APPARATUS AND METHOD FOR OPTICAL COMMUNICATION PROTECTION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
| <b>COMMISSIONER FOR PATENTS:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
| Transmitted herewith is an amendment in the above-identified application.<br>The fee has been calculated and is transmitted as shown below.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
| <b>CLAIMS AS AMENDED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | CLAIMS REMAINING<br>AFTER AMENDMENT | HIGHEST #<br>PREV. PAID FOR | NUMBER EXTRA<br>CLAIMS PRESENT                                                                                                                                                                                                                                                                                                                                      | RATE                   | ADDITIONAL<br>FEE            |  |
| TOTAL CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 53 -                                | 41 =                        | 12 x                                                                                                                                                                                                                                                                                                                                                                | \$18.00                | \$216.00                     |  |
| INDEP. CLAIMS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 10 -                                | 8 =                         | 2 x                                                                                                                                                                                                                                                                                                                                                                 | \$86.00                | \$172.00                     |  |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        | \$0.00                       |  |
| <b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        | <b>\$388.00</b>              |  |
| <input type="checkbox"/> No additional fee is required for amendment.<br><input checked="" type="checkbox"/> Please charge Deposit Account No. <b>19-2550</b> in the amount of <b>\$388.00</b><br><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>19-2550</b><br><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.<br><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
| <br>_____<br>Signature                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                     |                             | Dated: <b>August 13, 2004</b>                                                                                                                                                                                                                                                                                                                                       |                        |                              |  |
| <b>James McGraw (Reg. No. 28,168)</b><br><b>SMART &amp; BIGGAR</b><br><b>P.O. Box 2999, Station D</b><br><b>900 - 55 Metcalfe Street</b><br><b>Ottawa, Ontario</b><br><b>K1P 5Y6, Canada</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                             | I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.<br><br>_____<br>Signature of Person Mailing Correspondence<br><br>_____<br>Typed or Printed Name of Person Mailing Correspondence |                        |                              |  |
| 613-232-2486                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |
| CC:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                     |                             |                                                                                                                                                                                                                                                                                                                                                                     |                        |                              |  |

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